	REQ	UEST FO		D EXAMINATIO I Only via EFS	N(RCE)TRANSN Web)	ITTAL			
Application Number	10/617,455	Filing Date	2003-07-10	Docket Number (if applicable)	030255	Art Unit			
First Named Inventor	Yingyong Qi			Examiner Name	BRIER, JEFFERY A				
Request for C	ontinued Examina	ation (RCE)	practice under 37 Cl	I 7 CFR 1.114 of the FR 1.114 does not ap s form is located at V	above-identified appli oply to any utility or plan VWW.USPTO.GOV	cation. t application filed prior to June			
SUBMISSION REQUIRED UNDER 37 CFR 1.114									
Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).									
Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.									
Consider the arguments in the Appeal Brief or Reply Brief previously filed on									
Other									
∑ Enclosed									
☐ An	Amendment/Reply								
[X] Information Disclosure Statement (IDS)									
Affidavit(s)/ Declaration(s)									
☐ Ot	ner 								
			MIS	CELLANEOUS					
Suspensi (Period o	on of action on the f suspension sha	e above-ider ii not exceed	ntified application is a 3 months; Fee und	requested under 37 (er 37 CFR 1.17(i) rec	CFR 1.103(c) for a peri quired)	od of months			
Other									
<u> </u>				FEES					
The Dire	ctor is hereby aut			R 1.114 when the R ment of fees, or credi	CE is filed. t any overpayments, to				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED									
	Practitioner Signa ant Signature	ature .							

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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Signature of Registered U.S. Patent Practitioner								
Signature		Date (YYYY-MM-DD)	2009-10-07					
Name	MICHAEL/J. DEHAEMER, JR.	Registration Number	39164					

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